action of toxins at the hyperexcitable zone—the determining cause. The meningo-encephalitis accounts for the increased excitability of the motor cortex and supplies the predisposing cause, the toxins may arise from various sources. In forty-seven cases studied in which death was due to ictus, in nine there was meningeal hemorrhage, in two cerebral softening and in one, cerebral hemorrhage. Eliminating these twelve cases the following thirty-five showed the following conditions: Eleven, infections from the alimentary canal; five, uremia; one, diabetes; two, infections of the urinary tract; eight, acute infections of the pleura and lungs; and eight cases in which neither intoxication nor infection was demonstrable either clinically or at autopsy. In conclusion—ictus is a mode of termination in about one third of the cases of paresis. It cannot be considered as an habitual mode of termination, it is rather a more or less grave complication avoidable so far as it is possible to prevent by rational hygiene chances of infection and auto-intoxication.

2. *Pathology of Nerve Conductors.*—A somewhat extensive article dealing with biology, embryology, anatomy, physiology and pathology of nerves and concluding with certain medical and surgical inferences based thereon. The article is so condensed and treats of so many aspects of the subject that it does not lend itself to ready abstraction. The author repudiates the neurone doctrine and tries to explain certain medical and surgical conditions that appear incongruous on a new supposition that the prolongations of the cell are formed of chains of neuroblasts united at their extremities but preserving a certain autonomy.

W. A. White (Washington).

Revue Neurologique

(Vol. 15. No. 11. June 15, 1907)

1. Some Words Concerning the Work of M. Nageotte; Experimental Research on the Morphology of the Cells and Fibers of the Spinal Ganglia. M. G. Marinesco.
2. Research in the Psychology of Aphasics, "Memory" in Aphasics. N. Vaschide.

1. *Spinal Ganglia.*—Marinesco claims priority for experiments in transplantation of ganglia. The phagocytosis of the degenerating cells is carried on by polynuclear leucocytes.

2. *Memory in Aphasia.*—Memory in aphasics is replaced by a sort of intuition, a "reconnaissance-souvenir" an intellectual phenomenon which implies the existence of a subconscious association of spontaneous ideas, a sort of automatic revival of mental images.

(Vol. 15. No. 12. June 30, 1907)

1. On the Existence of Peripheral Factors in the Genesis of the Pathologic Reflex of the Great Toe. L. Baid.
2. The Sense of Pressure (Baresthesia). Max Egger.

1. *Toe Reflexes.*—In some cases of injury to the foot or leg followed by deformity and consequent change in the automatism of walking the reflex movements of the toes may be reversed also in cases where another automatic movement of the feet is developed by long use, such as moving a sewing machine by a treadle. The author cites cases of each sort.

2. *Pressure Sense.*—The author finds that contrary to the views of

Marinesco the sense of pressure is very different from osseus sensation that is best developed over soft parts such as muscles and better over relaxed than over contracted muscles. It is superficial sense, the physiological organ being the skin, and is a total of the sensation of direct contact and of traction on surrounding skin. It is conducted by way of the posterior columns of the spinal cord. Deep tissue such as muscle, tendon, etc., are only sensible to very deep pressure, causing a sensation which approaches pain.

(Vol. 15. No. 13. July 15, 1907)

1. Unilateral Paralysis of Multiple Cranial Nerves. P. Lajonne and Ed. Oppert.

1. *Cranial Polyneuritis.*—There was complete left facial paralysis. The left fifth nerve was affected in both motor and sensory functions and the left twelfth was affected. Complete recovery by electrical treatment. The diagnosis was a polyneuritis, non-specific.

(Vol. 15. No. 14. July 30, 1907)

1. Hysteria and Trophic Troubles, Simulation. Brissaud and Sicard.
2. Musical Amnesia in a Sensory Aphasic, Formerly a Professor on the Violin and Piano. Preservation of Execution of Improvisation and Composition. Henri Lamy.
3. Spinal Cord Lesions of Zona (Secondary Degeneration—Reaction à Distance, Medullary Congestion and Hemorrhage. Andre-Thomas and Laminière.

1. *Trophic Hysterical Disturbances.*—Hysterical-trophic disturbances so-called are the results of simulation.

2. *Musical Amnesia.*—The patient had jargon aphasia and jargon agraphia. He was amnesic to music completely, not remembering or recognizing familiar pieces but he was not music deaf and he preserved a perfect memory for the signs of written music, the technique and the fingering, which the author attributes to their being on a lower plane than the memories of polyphonique sonorities necessary to the remembrance of musical composition.

3. *Zona.*—A report of two cases of Zona, one affecting the cutaneous distribution of the eighth dorsal and the other the ninth dorsal spinal root. The respective roots were found degenerated and the rami communicantes of the sympathetic took part in the process. Within the cord there was found ascending degeneration in the posterior columns corresponding to the position of the fibers of the nerve roots affected. There was found also slight degeneration in the gray matter in the same segment, also a descending degeneration in the posterior column in the tract of Schultz which the author considers proof that the tract of Schultz is composed of descending fibers from the posterior roots. In the eighth dorsal the descending degeneration extended to three segments. In the other case it extended one and a half segments below the ninth dorsal. The gray matter of the affected side was deformed and contained hemorrhages and the cells of the intermedio-lateral tract at that level showed changes indicating the reaction à distance indicating the involvement of the sympathetic system. The author considers that zona is due not only to inflammation of the root ganglia but also the adjacent sympathetic.

(Vol. 15. No. 15. August 15, 1907.)

1. Apropos of Tactile Agnosia. D. DEJERINE.
2. Anatomic Pathological Study of the Localisation of the Motor Cortex, Apropos of Three cases of Amyotrophic Lateral Sclerosis with Degeneration of the Pyramidal Tract Traced by the Marchi Method from the Spinal Cord to the Cortex. ITALO ROSSI and GUSTAVE ROUSSY.

1. *Tactile Agnosia.*—The recognition of an object is due to two factors: First, the integrity of the sensory path which transmits the impressions to the cortex and second, the memory of the object. Recognition being an association of memories brought about by sensory stimuli. Max Egger reported two cases of agnosia (*Revue Neurologique,* May 15, 1907) and regarded the phenomenon in each case as due solely to defect in association. Dejerine disagrees with this opinion holding that the enlargement of the circles of Weber, the only sensory defect found by Egger in his cases, is quite sufficient to account for the failure to recognize objects placed in the hands. Dejerine states that he has found stereognostic disturbances in ataxics who presented sensory disturbances, particularly the enlargement of the circles of Weber.

2. *Amyotrophic Lateral Sclerosis.*—Three cases of amyotrophic lateral sclerosis are reported with full clinical histories and the anatomico-pathologic findings characteristic of the disease. The author calls attention to the presence of recent degeneration in the posterior longitudinal bundle, and in the corpus callosum. The degeneration in the pyramidal tract was traced to the cortex by the Marchi method and it was found that the ascending frontal convolution and the anterior part of the paracentral convolution contained many degenerated fibers whereas the ascending parietal and the posterior portion of the paracentral were very slightly affected, thus confirming the previous researches that the motor zone is almost entirely in front of the Rolandic fissure.

C. D. CAMP (Ann Arbor, Mich.).

Journal de Psychologie Normale et Pathologique

(Fifth year. No. 1. January–February, 1908)

1. Responsibility of Criminals (reply to Dr. Grasset). G. BALLET.
2. What is Pathological Psychology? G. DUMAS.
3. Principles of Scientific Physiognomy. P. HARTENBERG.

1. *Responsibility of Criminals.*—This is a reply to the article of Grasset upon the same subject in the last number of the JOURNAL. It is, therefore, largely argumentative, critical and indicative of differences in the use of terms. Ballet maintains that as yet no argument has been advanced by any one to cause him to change the position he took before the Geneva Congress. He says he agrees heartily with Grasset that society has the right to protect itself and to legislate in regard to all forms of dementia. He takes exception, however, to the loose conceptions which are involved in the use of such terms as "madness" and "half madness." These he insists are words belonging to lay medicine and popular psychiatry. They are utterly devoid of scientific accuracy and value. He calls upon Grasset to give a definite description of what he means by "medical responsibility." Is it a function of a psycho-physiological sort, demonstrable by scientific means in a laboratory?